PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09852056

| | | | SMALL ENTITY | | OR | OTHER THAN OR SMALL ENTITY | | | | | | |
|---|---|---|-------------------|----------------------|---------------------------------|--------------------------------------|----------|---------------------|------------------------|----------|---------------------|------------------------|
| TOTAL CLAIMS | | | 16 | | | | | RATE | FEE | | RATE | FEE |
| FO | R | | NUMBER FILED | | NUMBE | R EXTRA | | BASIC FEE | 355,00 | OR | BASIC FEE | 710.00 |
| то | TAL CHARGEA | BLE CLAIMS | 6 minus 20= | | • | | | X\$ 9= | | OR | X\$18= | |
| IND | EPENDENT CL | AIMS | 2 minus 3 = | | • | | | X40= | Dr. et | OR | X80= | |
| MU | LTIPLE DEPEN | DENT CLAIM P | RESENT | | | | | +135= | | | +270= | |
| * If the difference in column 1 is less than zero, ente | | | | | r "0" in c | olumn 2 | | TOTAL | | OR | TOTAL | 710 |
| Claims as amended - Part II | | | | | | | | l | | 1 | OTHER | |
| | | (Column 1) | (Colur | | | | 1 | SMALL | | OR | SWALL | |
| AMENDMENT A | illa oyayaya | REMAINING AFTER AMENDMENT | | NUM PREVI | IBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | _ | | X40= | | OR | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= | |
| | | | | | | | | TOTAL | | OR | TOTAL | |
| | | (Column 1) | | (Colu | ımn 2) | (Column 3) | | ADDIT. FEE | |]] - · · | ADDIT. FEE | |
| | 1000 1500 | (Column 1) CLAIMS | | HIG | HEST | ſ | ן | | ADDI- | 1 | | ADDI- |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | PREV | MBER IOUSLY FOR | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | • | Minus | *** | | <u> -</u> | | X40= | | OR | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | | +270= | |
| | | | | | | | | TOTAL | | OR | TOTAL | |
| | | | | | | | | ADDIT. FEE | | OR | ADDIT. FEE | |
| | | (Column 1) | | | ımn 2) | (Column 3) | <u>)</u> | | | | | |
| AMENDMENT C | Service Control | CLAIMS REMAINING AFTER AMENDMENT | | NUI PREV | HEST MBER IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | • | Minus | ••• | ···· | = | | X40= | | OR | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | 1 | 670 | |
| | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | <u></u> | OR | +270= | |
| •• | If the "Highest Nu | ımber Previously F ımber Previously F | Paid For" IN TH | IS SPACE IS SPACE | is less that is less that | an 20, enter "20 an 3, enter "3." | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | The "Highest Nur | nber Previously Pa | aid For" (Total c | r Indepen | ident) is th | e nignest numb | oer fo | ound in the ap | propriate oc | in C | oluliili 1. | |